## PART B - FEE(S) TRANSMITTAL

## Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1456

P.O. Box 1450 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

INSTRICTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required) Block: I through 5 should be completed where appropriate All finite correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPOND	Note: A certificate of mailing can only be used for domestic mailings of the						
				Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
26123	7590 03/24	V2010					
BORDEN LAI Anne Kinsman WORLD EXCH	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmital is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
100 QUEEN ST		(Depositor's mene)					
OTTAWA, ON CANADA	KIF 119		(Signature)			(Signature)	
CHADA							(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTORNEY DOCK		CONFIRMATION NO.
10/673,480	10/673,480 09/30/2003		Mo-Han Fong		0583P57U		1538
TITLE OF INVENTION	: MULTI-CARRIER L	OAD BALANCING SCH	IEME FOR VOICE A	ND DATA			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	OUE PREV. PAID ISSU	Æ FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$0	\$0		\$1510	06/24/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS	3			
HOLLIDAY, JAIME MICHELE		2617	455-453000	_			
1. Change of correspondence address or indication of "Fee Address" (3: CFR 1.363).			2. For printing on the patent front page, list Leslie A. Kinsman				
☐ Change of correspondence address for Change of Corresponden Address form PTO/SB/122) attached. ☐ "Free Address" indication for "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custon Number is required.			(1) the names of up to 3 registered patent attorneys or agent to Ratlenatively.  (2) the name of a single firm flaving as a member a registered patent attorneys or agent and the names of up to 2 registered patent attorneys or agent. If no name is lineted, no name will be printed.				
		A TO BE PRINTED ON					
PLEASE NOTE: Un recordation as set fort	less an assignee is ident h in 37 CFR 3.11. Comp	ified below, no assignee pletion of this form is NO	data will appear on t T a substitute for filing	he patent. If an assig g an assignment.	nee is ide	entified below, the do	cument has been filed for
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
NORTEL NETWORKS LIMITED			St. Laurent, Quebec, CANADA				
Please check the appropr	iate assignee category or	categories (will not be p	rinted on the patent):	Individual 🗗 C	Corporatio	on or other private gro	up entity Government
4a. The following fee(s)	are submitted:	4	b. Payment of Fee(s): (	(Please first reapply a	ny previ	ously paid issue fee s	hown above)
☑ Issue Fee			A check is enclosed.				
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies			☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-1315 (enclose an extra copy of this form).				
5. Change in Entity Sta			D				
	s SMALL ENTITY state			longer claiming SMA			
interest as shown by the	records of the United Sta	tes Patent and Trademark	d from anyone other tr k Office.	nan the appucant; a res	istereo a	uorney or agent; or th	e assignee or other party in
Authorized Signature	/Leslie A.	Kinsman/		Date	Jun	e 24, 2010	
Typed or printed name Leslie A. Kinsman			Registration No. 45, 291				
This collection of inform an application. Confiden submitting the complete this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	I application form to the ions for reducing this bu 'irginia 22313-1450. DC	CFR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the ONOT SEND FEES OR	on is required to obtain 1.14. This collection in depending upon the e Chief Information O COMPLETED FORM	or retain a benefit by is estimated to take 12 individual case. Any c officer, U.S. Patent and IS TO THIS ADDRES	the publi minutes omments I Tradem S. SEND	e which is to file (and to complete, including on the amount of tin ark Office, U.S. Depa TO: Commissioner f	by the USPTO to process) g gathering, preparing, and ne you require to complete rtment of Commerce, P.O. for Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.